Death Record

HAMILTON COUNTY CORONER'S OFFICE

Cincinnati, Ohio

Case No. CC17-02221

Reported By: Dr. Daniel Canter

Case Type: View

Agency: University of Cincinnati Medical Center

Case Reported: 06/19/2017 Time Reported: 2:49 pm

Reported To: John Hatfield - Gretel C. Stephens, M.D.

Name of Deceased: **Otto Fredrick Warmbier** Age: 22 Birth Date: 12/12/1994

Address Street&No.: 225 West Hill Lane

City/State: Wyoming, Ohio Zip Code: 45215

Marital Status: Single Sex: Male Race: White

Found dead at:

Injured at:

Time: Date:

Investigated by:

Next of kin notified by: University of Cincinnati Medical Center Date: 06/19/2017

Pronounced dead by: Dr. Daniel Canter Date: 06/19/2017

Inpatient Treatment University of Cincinnati Medical Center Time: 2:20 pm

Postmortem examination by:

Body viewed by: Gretel C. Stephens, M.D. Date:

Disposition of body: Buried

Location: Oak Hill Cemetery, Cincinnati, Ohio Date: 06/22/2017

Funeral Director: Spring Grove Funeral Homes - 3464 Central Parkway, Cincinnati, Ohio 45223

IMMEDIATE CAUSE OF DEATH

		Approximate Interval Between Onset and Death
Due to (A)	Complications of chronic anoxic/ischemic encephalopathy	1+ YEAR
Due to (B)	Unknown insult more than a year prior to death	1+ YEAR
Due to (C)		
Due to (D)		

Part II. Other significant conditions contributing to death but not related to the terminal disease condition given in Part (A).

Manner of Death:
Undetermined
348.1

Death Certificate Distribution:
BVS
Date: 09/13/2017

K B Footman

Acting Coroner of Hamilton County, Ohio

Hamilton County Coroner

The Frank P. Cleveland, M.D. Institute of Forensic Medicine, Toxicology and Criminalistics
3159 Eden Avenue, Cincinnati, Ohio 45219-2299
Office: 513-946-8700 Fax: 513-946-8727

OTTO FREDRICK WARMBIER **CC17-02221**

OPINION

Diagnoses:

1. Chronic anoxic/ischemic encephalopathy:
   A. Flexion contractures of the upper extremities
   B. Extension contractures of the lower extremities.

2. Two partially pigmented scars of the left lower leg and foot with multiple additional small cutaneous scars.

Cause of Death: Complications of chronic anoxic/ischemic encephalopathy due to unknown insult more than a year prior to death.

Manner of Death: Undetermined.

Gretel C. Stephens, M.D.
Deputy Coroner, Forensic Pathologist
Hamilton County, Ohio

9/11/2017
Date

POSTMORTEM EXTERNAL EXAMINATION
OF THE BODY OF

OTTO FREDRICK WARMBIER

A postmortem external examination of the body of an adult white man identified by the hospital of death as ZZZHARRISBURG, MALES G, the medical alias for Otto Warmbier, is performed at the Hamilton County Morgue on Monday, June 19, 2017 after receipt of the mother's request for waiver of Hamilton County Coroner's office right to conduct an autopsy on the body of Otto Warmbier is honored. The examination is conducted by Gretel C. Stephens, M.D. and is begun at 5:20 p.m. with Dr. Lakshmi Sammarco in attendance.

EXTERIOR OF THE BODY:

The body is that of a well-developed, well-nourished adult man that weighs 160.5 pounds as received nude. The body measures 74.5 inches in length. The body mass index is 20.33 Kilograms per meter squared. The body appears compatible with the stated age of 22 years. The body is slightly cool to the touch. Rigor mortis is present in the jaw. Livor mortis extends over the dorsal surface of the body, except in the areas exposed to pressure.

The scalp hair is dark brown and measures 1/4 inch in length. There is a small oval area of decreased hair overlying the dorsal scalp just left of the occipital prominence. Brown facial stubble 2 millimeters in length is also present. The body hair is also dark brown and there are areas of decreased body hair. The irides are gray and the corneas are clear. The pupils are bilaterally equal and 8 millimeters in diameter. The sclerae and conjunctivae are pale except for mild vascular congestion of the lateral right eye conjunctiva compatible with the position of his head which is received turned to his right. The nose shows no remarkable alteration. The ears show no remarkable alteration. The lips and gums show a 4 millimeter nodule extending above the skin at the mucocutaneous margin of the right lower lip medial to a more lateral area of slight tissue retraction with central small pale scar. The teeth are natural and in good repair. The neck is supple, without masses, and the larynx is in the midline.

The thorax is well-developed and symmetrical. The breasts are normally developed and symmetrical male breasts without palpable masses. The abdomen is relatively flat. The external genitalia are those of a normal circumcised adult penis with bilaterally descended testes. The anus and back are unremarkable.

The upper and lower extremities are symmetrical without absence of digits, but there are flexion contractures of the mid-arms, hands and wrists and extension contractures of the legs and feet and the feet also extend slightly medially.

IDENTIFYING MARKS AND SCARS:

There is a small pale scar of the midline dorsal presacral area. There are multiple very small scars of the dorsal chest. There is a round scar just above the sternal notch with mild retraction, consistent with a tracheostomy scar. There are two punctate pale scars overlying the right internal jugular area. There is a small purple scar involving the lower right prepatellar skin and another small purple scar just distal and lateral to the area of the right patella. There is a row of

roughly parallel pale striae distensae overlying the right inguinal crease and proximal right femoral area. There is a small pigmented scar of the ventromedial right mid lower leg. There is a larger pigmented scar involving the skin of the junction of the left foot and ankle ventrolaterally. There is a large 4.3 x 1.6 inches irregular pigmented scar with paler areas involving the dorsum of the right foot. There is a slightly pigmented transverse somewhat oval scar involving the ventral proximal left upper arm.

EVIDENCE OF MEDICAL THERAPY:
A Foley catheter is in place which is knotted and shows no tubing or reservoir. There is a large adhesive pad attached to the presacral skin. There are two punctures with fading contusions involving the skin of the right lower abdomen. A right white UC Health band is in place around the right distal lower extremity and an identical band is around the distal right forearm, both bearing identifying information including the medical alias "ZZZHARRISBURG, MALES G". There is a yellow "Fall Risk" wristband proximal to the UC Health wristband around the right distal forearm. There is a double lumen intravenous cannula with intermittent tips in the distal left upper arm in the area of the left basilic vein.

EXTERNAL EVIDENCES OF INJURY:
Head and Neck:
There are punctate eschars, venous distention, and yellow remnants of pink contusion involving the skin overlying the left internal jugular area of the neck.

Torso:
In addition to the punctures with fading contusions of the right lower abdomen, there is a small fading contusion of the dorsal lower lumbar midline.

Upper and Lower Extremities:
There are two small contusions of the dorsal right mid arm. There is a small contusion proximal to the left olecranon process in the distal left upper arm. There is a small contusion just lateral to the left patellar skin. There are two small contusions involving the lateral surface of the right thumb. There are three small contusions involving the lateral surface of the left thumb.

09/11/2017 njb